



Response Under 37 CFR §1.116
Expedited Procedure - Group 2878

03500.016166.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: Christine Sung
SATOSHI OKADA, ET AL.)	
	:	Group Art Unit: 2878
Application No.: 10/066,618)	
	:	
Filed: February 6, 2002)	
	:	
For: SCINTILLATOR PANEL,)	
RADIATION DETECTOR	:	
AND MANUFACTURE)	
METHODS THEREOF	:	September 2, 2004

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AFTER FINAL REJECTION

Sir:

In response to the Final Office Action dated June 8, 2004, please amend the
above-identified application, as follows:



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BOX AF

IFW
AF/2878

Response Under 37 CFR §1.116
Expedited Procedure - Group 2878

In re Application of:

Docket No. 03500.016166

SOTOSHI OKADA, ET AL.

Application No.: 10/066,618

Examiner: Christine Sung

Filed: February 6, 2002

Group Art Unit: 2878

For: SCINTILLATOR PANEL, RADIATION DETECTOR
AND MANUFACTURE METHODS THEREOF

Date: September 2, 2004

Mail Stop AF
THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment After Final in the above-identified application.

☒ No additional fee is required.

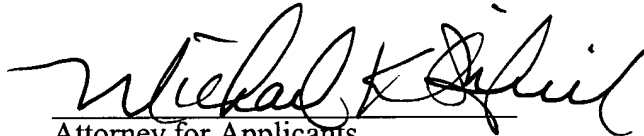
The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	21	MINUS	44	= 0	x \$9 \$18	\$.00
INDEP. CLAIMS	6	MINUS	7	= 0	x \$43 \$86	\$.00
Fee for Multiple Dependent claims \$145°/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---					\$.00	\$.00

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicants
Michael K. O'Neill
Registration No.: 32,622

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200